

Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number :		2007306		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: YAW, GENE FRIENDS OF FOR SENATE												
Street Address: PO BOX 3246												
City: WILLIAMSPORT						State: PA			Zip Code: 17701-0000			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7. X	Year 2014	FILING METHOD () CHECK ONE				PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
SENATOR IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	23	STS	REP	41
						11	4	2014	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	25	2014		12	31	2014				
A. Amount Brought Forward From Last Report						\$ 38,186.76						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 4,200.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 42,386.76						
D. Total Expenditures (From Schedule III)						\$ 1,704.04						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 40,682.72						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 57,829.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
YAW, GENE FRIENDS OF FOR SENATE	From: <u>11/25/2014</u> To: <u>12/31/2014</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 0.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 0.00
All Other Contributions (Part B)	\$ 1,400.00
TOTAL for the Reporting Period (2)	\$ 1,400.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 1,000.00
All Other Contributions (Part D)	\$ 1,800.00
TOTAL for the Reporting Period (3)	\$ 2,800.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 4,200.00
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<div>PART A</div> <div>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</div> <div>\$50.01 TO \$250.00</div> <div>Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.</div>						
Name of Filing Committee or Candidate				Reporting Period		
				From:		To:
				DATE		AMOUNT
Full Name of Contributing Committee				MO	DAY	YEAR
Mailing Address						
City	State	Zip Code (Plus 4)				
						\$ 0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 0.00

PART B
ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

**Use this Part to itemize all other contributions with an aggregate value from
\$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A)**

Name of Filing Committee or Candidate YAW, GENE FRIENDS OF FOR SENATE				Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>			
				DATE		AMOUNT	
Full Name of Contributor Carolyn Doolittle				MO	DAY	YEAR	\$ 100.00
Mailing Address 23722 St Rt 267				11	29	2014	
City Friendsville	State PA	Zip Code (Plus 4) 18818					
Full Name of Contributor Richard Bennett				MO	DAY	YEAR	\$ 150.00
Mailing Address 1744 Pennsylvania Ave Apt 2				11	29	2014	
City Sayre	State PA	Zip Code (Plus 4) 18840					
Full Name of Contributor Staci Covey				MO	DAY	YEAR	\$ 150.00
Mailing Address 11696 Sheshequin Rd				11	29	2014	
City Athens	State PA	Zip Code (Plus 4) 18810					
Full Name of Contributor Ronald Reynolds				MO	DAY	YEAR	\$ 150.00
Mailing Address 81 Millstone Dr				11	29	2014	
City Montoursville	State PA	Zip Code (Plus 4) 17754					
Full Name of Contributor Robert E Kane				MO	DAY	YEAR	\$ 150.00
Mailing Address 849 Louisa St				11	29	2014	
City Williamsport	State PA	Zip Code (Plus 4) 17701					
Full Name of Contributor Charles Santangelo				MO	DAY	YEAR	\$ 150.00
Mailing Address 1614 Lincoln Ave				11	29	2014	
City Williamsport	State PA	Zip Code (Plus 4) 17701					

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
Kenneth B Young				11	29	2014	
Mailing Address 1217 Woodmont Ave							
City Williamsport	State PA	Zip Code (Plus 4) 17701					

Full Name of Contributor				MO	DAY	YEAR	\$ 150.00
Jan Fisher				11	29	2014	
Mailing Address 101 Greenbriar Dr							
City Wellsboro	State PA	Zip Code (Plus 4) 16901					

Full Name of Contributor				MO	DAY	YEAR	\$ 150.00
Dan Glunk				11	29	2014	
Mailing Address Grampian Blvd							
City Williamsport	State PA	Zip Code (Plus 4) 17701					

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL

\$ 1,400.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting Period
YAW, GENE FRIENDS OF FOR SENATE	From: <u>11/25/2014</u> To: <u>12/31/2014</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
HAPAC				11	29	2014	
Mailing Address4750 LIndle Rd Po Box 2335							
CityHarrisburg	StatePA	Zip Code (Plus 4)17105					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
NFG PAPAC (NATIONAL FUEL GAS)				12	4	2014	
Mailing Address1100 State St							
CityERIE	StatePA	Zip Code (Plus 4)16501					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 1,000.00

PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00

**Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C.)**

Name of Filing Committee or Candidate YAW, GENE FRIENDS OF FOR SENATE	Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>
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				DATE			AMOUNT
Full Name of Contributor Michael O'Keefe				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 478 Beth Ellen Dr							
City Lewisburg	State PA	Zip Code (Plus 4) 17737					
Employer Name Evangelical Community Hosp				Occupation Hospital Admin Pres/CEO			
Employer Mailing Address/Principal Place of Business One Hospital Dr			City Lewisburg		State PA	Zip Code (Plus 4) 17737	
Full Name of Contributor William McCauley				MO	DAY	YEAR	\$ 300.00
Mailing Address 840 Vallamont Dr							
City Williamsport	State PA	Zip Code (Plus 4) 17701					
Employer Name Susquehanna Health				Occupation Physician/EVP/CMO			
Employer Mailing Address/Principal Place of Business 700 High St			City Williamsport		State PA	Zip Code (Plus 4) 17701	
Full Name of Contributor Steve Johnson				MO	DAY	YEAR	\$ 500.00
Mailing Address 270 Carone Dr							
City Cogan Station	State PA	Zip Code (Plus 4) 17728					
Employer Name Susquehanna Health				Occupation President and CEO			
Employer Mailing Address/Principal Place of Business 700 High St			City Williamsport		State PA	Zip Code (Plus 4) 17701	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 1,800.00

PART E
OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE			AMOUNT	
Full Name					MO	DAY	YEAR	\$ 0.00
Mailing Address								
City		State	Zip Code (Plus 4)					
Receipt Description								

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.**

Detailed Summary Page

Name of Filing Committee or Candidate		Reporting Period	
YAW, GENE FRIENDS OF FOR SENATE		From: <u>11/25/2014</u> To: <u>12/31/2014</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period	
	From:	To:

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL \$ 0.00

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
YAW, GENE FRIENDS OF FOR SENATE	From <u>11/25/2014</u> To: <u>12/31/2014</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
Gene Yaw				
Mailing Address 1916 Mountview Ave	12	23	2014	\$ 1,069.24
City Montoursville	State PA	Zip Code (Plus 4) 17754	Description of Expenditure reimburse stamps, christmas gifts and cards, storage unit rental fee	
To Whom Paid	MO	DAY	YEAR	
Gene Yaw				
Mailing Address 1916 Mountview Ave	12	4	2014	\$ 625.00
City Montoursville	State PA	Zip Code (Plus 4) 17754	Description of Expenditure reimburse for gifts	
To Whom Paid	MO	DAY	YEAR	
USPS				
Mailing Address Reach Road	12	4	2014	\$ 9.80
City Williamsport	State PA	Zip Code (Plus 4) 17701	Description of Expenditure stamps	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 1,704.04

SCHEDULE IV

STATEMENT OF UNPAID DEBTS

**Use this Section to itemize all unpaid debts and obligations
which are outstanding at the end of the reporting period**

Name of Filing Committee or Candidate YAW, GENE FRIENDS OF FOR SENATE	Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>
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				DATE			Outstanding Balance of Debt
Name of Creditor				MO	DAY	YEAR	\$
Gene Yaw							
Mailing Address				12	31	2014	
1416 Mountview Ave							\$ 57,829.00
City	State		Zip Code (Plus 4)	Description of Debt			
Montoursville	PA		17754	LOAN BALANCE CARRIED FORWARD			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL
							\$ 57,829.00